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Iradierea sângelui cu ultraviolete a revoluționat medicina - de ce a dispărut?

De un doctor din Midwest
Cercetare globală, 15 iunie 2025
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Lumina naturală este un nutrient esențial de care mulți dintre noi avem lipsă. Atunci când lumina ultravioletă este introdusă în fluxul sanguin, apar beneficii remarcabile pentru sănătate.

Industria dermatologică a creat isterie cu privire la cancerele benigne induse de soare, ignorând în același timp faptul că melanomul mortal rezultă de fapt din deficitul de lumină solară, nu din expunerea excesivă.

Odată ce iradierea ultravioletă a sângelui (UVBI) a fost descoperită în anii 1930, aceasta a produs rezultate miraculoase pentru pacienții aflați în pragul morții și a fost rapid adoptată de spitalele din întreaga America, demonstrând o eficacitate remarcabilă pentru o gamă largă de boli.

Pentru a neutraliza această concurență, Asociația Medicală Americană a publicat un studiu elaborat care a „demontat" UVBI-ul, iar acesta a devenit o terapie uitată. Rușii și germanii i-au recunoscut valoarea și au produs decenii de cercetări care arată utilitatea remarcabilă a UVBI-ului.

Acest articol explorează istoria remarcabilă a UVBI, suprimarea sistematică și fundamentul științific, demonstrând de ce această terapie reprezintă una dintre oportunitățile pierdute ale medicinei.

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Am încercat să argumentez că ni se refuză în mod constant cunoștințe, tratament și îngrijire vitale pentru a proteja interesele complexului industrial medical. De exemplu:

- Am subliniat modul în care produsele farmaceutice nesigure ajung pe piață, deoarece comisiile de aprobare erau pline de oameni care luau bani de la producători (ceea ce a fost o tactică folosită de Anthony Fauci împotriva Americii).
- Am discutat [1] cum Asociația Medicală Americană a fost preluată de oameni de afaceri fără scrupule care au finanțat asociația promovând orice produs pentru care erau plătiți (motiv pentru care existau atât de multe reclame AMA cu medici care promovau fumatul) [2] în timp ce foloseau guvernul pentru a scoate în afara legii terapiile concurente.
- Am arătat cum societatea americană a fost privată de cerințele fundamentale de sănătate (de exemplu, somnul sau lumina soarelui), cât de dăunătoare este pierderea acestora și cât de departe merge industria de marketing pentru a se asigura că nu vom mai recupera niciodată aceste cerințe de bază pentru sănătate.

Acest lucru sugerează că există inovații medicale remarcabile care au fost trecute cu vederea sau uitate. Voi discuta despre una dintre ele - iradierea sângelui cu ultraviolete (UVBI) - deoarece există dovezi vaste pentru utilizarea sa și, spre deosebire de multe alte tehnologii medicale pierdute, este încă relativ accesibilă.

Importanța luminii solare

A widely held view exists that sunlight (particularly its ultraviolet component) is dangerous and must be avoided. Remarkably, much of that came from a 1980s public relations campaign that the struggling dermatology profession used to rebrand themselves as cancer fighters by creating a hysteria about benign sunlight-induced cancers while downplaying that the deadly skin cancer, melanoma, actually results from a lack of sunlight.

Treating skin cancer is both straightforward and highly lucrative, making dermatology one of the most sought-after medical specialties.

Note: *A 20 year prospective study of 29,518 Swedish women found that those who avoided sunlight were 130% more likely to die than women who had regular sunlight exposure.[3] They were much more likely to develop various medical conditions (e.g., they were twice as likely to get cancer).*

As such, I've attempted to shine light on the critical benefits we receive from sunlight, how many illnesses result from artificial lighting and a lack of sunlight, and that the same changes observed in plants and animals due to unhealthy lighting are also observed in humans (all of which is discussed here). Key points I covered there included:

- Unhealthy light causes and exacerbates cancers and significantly increases infection risk (particularly in livestock).
- Unhealthy light contributes to behavioral disorders (e.g., ADHD).
- Healthy lighting significantly increases the health, fertility, and productivity of domesticated animals.
- The circadian rhythm (which regulates sleep and healing) is heavily disrupted by unnatural lighting.
- Many biological structures are highly sensitive to specific light wavelengths, which is problematic because artificial lighting has narrow bands rather than a complete spectrum.
- Light plays a critical role in generating circulation and protecting blood vessels.
- Ultraviolet light is particularly critical for health. The most dramatic benefits of light therapies occur when appropriate UV light is administered to the body.
- Glass blocks essential UV light, so modern life prevents access to that light, creating widespread UV deficiency.
- Since skin has difficulty absorbing UV light, we receive much light through the eyes. When individuals wear glasses blocking sunlight from entering their eyes, health problems can ensue that resolve once addressed.

The major challenge with light therapies is getting light inside the body. Fortunately, methods have been developed to do this, producing remarkable results for over a century.

The History of Ultraviolet Blood Irradiation

One of the oldest "proven" therapies was having people bathe in sunlight. It was one of the few things that actually succeeded in treating the 1918 influenza.[4] Prior to antibiotics, it was one of the most effective treatments for tuberculosis[5] and was widely used for other diseases (e.g., erysipelas and mumps).[6] One UVBI pioneer noted that low doses of externally applied UV light stimulated general resistance to infection in animals and humans.[7]

The medical field concluded that part of sunlight's value was that ultraviolet within it was a sterilizing agent, and UV devices were developed to sterilize things. For example, one of the most effective ways to prevent COVID-19 indoors was exposing air to UV light, and one promising approach explored for treating COVID-19 was safely putting UV light inside the respiratory tract to sterilize viral particles (which is what Trump was actually describing during his infamous disinfectant remark).[8]

Since blood-borne infections (septicemia) were a major problem, in 1927, Emmett K. Knott (who was not a doctor) decided to try sterilizing blood by extracting it, exposing it to UV light, and returning it to the body. Initially, when testing this by infecting dogs with lethal bacteria, he found that while treated dogs didn't have bacteria in their blood at death, they still died after about a week.

Eventually, in 1928 an accident happened and Knott dramatically under-dosed a septic dog, after which the dog had a dramatic recovery — leading Knott to realize only a small amount of blood should be irradiated. Shortly after, Knott received a request from a doctor friend whose sister

was dying from septicemia for blood irradiation. The UVBI treatment worked, and the woman made a complete recovery.

For five years, Knott refined his method without testing it on humans, likely due to the difficulty in finding willing doctors and the Great Depression. Eventually, in 1933, another Seattle doctor with a septic patient on the verge of death reached out to Knott, and again UVBI resulted in dramatic recovery.

Knott began traveling the country with his massive machine, and beginning in 1937, successfully convinced skeptical hospital doctors to use UVBI. As the therapy proved itself, more people adopted it, and by the 1940s, pioneering physicians who tested it on hundreds of patients found that UVBI consistently treated conditions such as sepsis, pneumonia (including viral pneumonias), kidney disorders, asthma, polio, botulism, rheumatic fever, and viral hepatitis.

UVBI almost always worked if administered early in the infection, often yielding miraculous results even when patients were on the verge of death, and significantly shortened hospital stays.

Note: *Dr. George Miley, who had done the most UVBI work, commented on Knott's work in 1940: "I think personally that this is one of the greatest contributions to medicine ever made by a citizen of the United States."*

By the early 1950s, UVBI was being used in approximately 50 American hospitals, with doctors reporting they had used it on thousands of patients and consistently seen immediate and miraculous results alongside a complete absence of side effects.

These doctors documented their work in a significant body of literature: 50 papers by 20 different authors (published in 18 different medical journals) covering over 3,000 patients with 36 different diseases — all finding remarkable UVBI benefits. UVBI was promoted in mainstream media (e.g., The New York Times[9]and Time Magazine[10]).

Here's one case from a physician who between 1938 to 1943 successfully treated over 400 patients with 35 different diseases using UVBI:[11]

> "A patient had thrombosis of the cerebellar artery (brain blood clot), pneumonia, bacterial blood infection, lung emboli, leg blood clot, and paralysis of his left side and vocal cords — a hopeless and terminal case. When seen by Dr. Barrett, the patient was delirious and irrational, had eaten nothing except Coca-Cola for 11 days, and had lost 45 pounds.
>
> He was immediately treated with UVBI and had an almost instant response. After a second treatment in three days, there was further dramatic improvement. Although it took several months, he recovered completely, regaining the 45 pounds he had lost and adding another ten. This patient would almost certainly have died within days without UVBI therapy."

Market Monopolization

At this point, the American Medical Association (AMA) became involved and attempted to extort Knott by offering to conduct a study validating UVBI for $100,000 (approximately $1 million today) and to purchase the rights to Knott's device in return for a small sales cut.

After Knott refused (as did physicians across America advocating for UVBI), the AMA decided to do its study anyway. It was overseen by a friend of the AMA director (who was designing a competing device) and curiously, prior to being done, JAMA announced it was likely to fail.

The study had various issues (e.g., no one could inspect the machine, when returned they discovered a film had blocked UV light from reaching blood, it only had 68 test subjects, many cases were conditions UVBI wasn't used for).[12] Nonetheless, no adverse events occurred, no one died (despite many having dangerous conditions), and many patients experienced significant improvement. Despite this, the 1952 study concluded:[13]

> "We have concluded that none of our patients derived benefit from the irradiation of blood with the Knott hemo-irradiator."

Because of this "definitive study," hospitals across America quickly abandoned UVBI and became fully committed to emerging antibiotics. Knott stopped producing his machine and died in 1961. The Salk vaccine also eliminated interest in finding polio treatments.

Note: *Fortunately, UVBI revived in Russia, the former Soviet states, and Germany. Unlike America, these countries couldn't afford extravagant medical spending and lacked routine censorship of scientific ideas that threatened the medical industrial complex. Operating on shoestring budgets, they were motivated to find economical disease solutions.*

The most noteworthy aspect was that the exact same thing has been done to many other promising therapies. For example, around this time, the AMA approached the inventors of alternative cancer therapies (such as the Krebiozen, Hoxey and the Koch Catalyst) and pressured them to sign away almost all of the rights for the treatment to the AMA or be blacklisted.[14]

In each case, the inventor refused because they wanted it to remain affordable to everyday people, after which the AMA launched a blitz against the therapy,[15] and then with the help of the FDA, buried it (which was later corroborated by a 1953 Congressional investigation).[16] In short, because of the power the AMA wielded, a single fraudulent negative study could immediately erase large bodies of independent research showing otherwise.

As Pierre Kory details in "The War on Ivermectin," this happened throughout the pandemic with unpatentable COVID-19 treatments.[17] With hydroxychloroquine, the Lancet published a trial arising from overtly false data (later retracted) showing HCQ was killing people, leading to worldwide trial terminations.[18]

In contrast, numerous independent studies found HCQ was one of the safest and most effective COVID-19 treatments if used early, and prior to COVID-19, the "incredibly dangerous" HCQ was considered one of the safest and most essential medications in existence.

Note: *Similar absurdities occurred with ivermectin and vitamin D (which for decades has proven more effective at preventing flu than annual flu shots).*[19]

Paul Marik (widely considered the world's top critical care expert)[20] repeatedly demonstrated that IV vitamin C is transformative for sepsis when administered early, dramatically reducing death rates (e.g., his hospital's sepsis death rate dropped from 22% to 6%,[21] and in a study, from 40.4% to 8.5%).[22] Yet this therapy was "debunked" because studies only gave IV vitamin C late in hospitalization (where it no longer works), making it nearly impossible to get IV vitamin C at American hospitals.

Note: *During the early days of AIDS, Anthony Fauci suppressed lifesaving AIDS treatments while pushing a dangerous failed cancer drug that became standard AIDS treatment based on fraudulent studies.*[23]

The costs of each of these are huge. Sepsis for example, is the third leading cause of death in hospitals and kills 350,000 Americans each year.[24] Similarly, the primary cause of death from cancers is metastases, and many of the extreme approaches used to treat cancer are justified under the possibility that they might prevent a metastasis.

Likewise, COVID-19 being "incurable" cost our nation trillions of dollars and killed hundreds of thousands of Americans. Conversely, whenever an industry supported drug comes to market, it doesn't matter how dangerous or ineffective its data shows it to be (e.g., the data for both the COVID-19 vaccines and remdesivir showed they had significant dangers and provided minimal benefit), a method will always be found to argue they are in fact extremely "safe and effective."

Sadly, while awareness of UVBI's miraculous properties has now largely disappeared thanks to the AMA's control of the media, reports of it still emerge. For example, last year Joe Rogan and Jimmy Dore discussed how Trump discussing placing UV light inside the body to treat COVID was misconstrued as "injecting bleach" and how the AMA erased this revolutionary therapy.

Watch video on X.

Types of Blood Irradiation

Various methods exist for getting light inside the body. In the classic approach, blood is removed, typically diluted, and then infused back, allowing it to pass through light (requiring IV parts made of quartz glass, through which UV light can pass).

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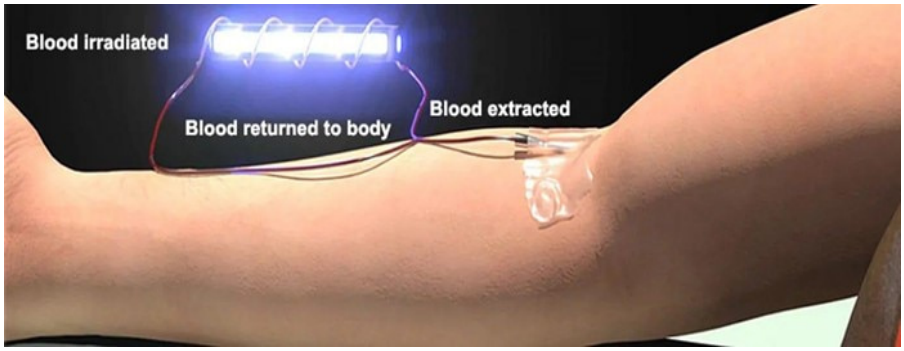

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German and Russian researchers developed alternative approaches — directly applying a laser onto surface blood vessels (e.g., behind the knee or under the tongue) or threading fiber optic cables into vessels and illuminating from inside. These approaches (collectively known as laser blood irradiation or LBI) have been found relatively equivalent,[25] with LBI requiring more treatments.

A leading researcher determined LBI had more rapid effects and was better for bronchodilation and allergen hyposensitization,[26] while UBI had more substantial bactericidal and anti-inflammatory effects. Two weeks after treatment, UBI typically obtained better microcirculation results than LBI.

Numerous studies demonstrate that LBI is effective for a wide range of medical conditions, with varying effects depending on the light wavelengths used. To quote a recent review paper about LBI use in Russia:[27]

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Cell Type	Result	Wavelength, nm
E. coli, S. aureus	Proliferation	467
Hippocampus	Epileptiform activity (suppression of it)	488
Fibroblasts	Proliferation	633
Fibroblasts	Increase of Ca^{2+}concentration	633
Keratinocytes	Increase of IL-1α and IL-8 production and mRNA expression	633
Macrophages	Proliferation	633
Fibroblasts, *E. coli*	Proliferation	660
Human neutrophils	Increase of Ca^{2+}concentration in cytosol	812
Cells of human buccal epithelium	Proliferation	812
E. coli	Proliferation	890
Myoblasts C2C12	Proliferation, viability	660, 780
HeLa	Mitotic activity	633, 658, 785
E. coli	Proliferation	633, 1064, 1286

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Additionally:

- Unlike UVBI, LBI is not easily obtainable in the United States.
- Unlike UVBI, LBI can only apply one wavelength at a time (due to laser coherence needs).

UVBI Research Foundation

UVBI researchers have identified over 200 journal articles on UVBI and LBI published between 1934 and 2020, with a third viewable online. These studies consistently found a complete absence of side effects from UVBI.[28] Conditions with evidence of UVBI efficacy include:

- **Bacterial infections** (sepsis, septic abortions, osteomyelitis, meningitis, tuberculosis, typhoid fever)[29]
- **Viral infections** (pneumonia, shingles, hepatitis, severe COVID-19, long COVID, polio, AIDS)[30]
- **Cardiovascular disorders** (heart attacks, angina, peripheral arterial disease, intermittent claudication, Raynaud's, thrombophlebitis, high blood pressure, pulmonary hypertension)[31]
- **Autoimmune disorders** (rheumatoid arthritis, asthma, eczema, multiple sclerosis, transplant rejections)[32]
- **Abdominal conditions** (liver, biliary and gallbladder diseases, pancreatitis, disseminated peritonitis, kidney diseases)[33]
- **Surgery** (preventing post-operative complications, reducing death rates, accelerating recovery, treating postoperative ileus or burns)[34]
- **Obstetrics and gynecology** (male and female fertility, preventing miscarriages, preeclampsia, healthy babies, polycystic ovarian syndrome, pelvic inflammatory diseases)[35]
- **Neurologic and psychiatric disorders** (depression, schizophrenia, migraine headaches, poor cerebral blood flow creating tinnitus, foggy head or insomnia)[36]

Note: *All of the studies for the above conditions are discussed and summarized in this article.*

Vasogen — The Patent Solution

One major UVBI barrier is that it's not patentable and cannot justify the immense costs of clinical trials and lobbying for FDA approval. In the 1990s, the Canadian company Vasogen attempted to solve this problem by creating a device that mixed ozone, UVBI, and heat within its proprietary device, then injected it into the gluteal muscle.

This proprietary approach (deemed "irrational" by a leading ozone researcher)[37] performed significantly worse than other methods but still produced remarkable results, resulting in Vasogen raising 225 million dollars, conducting over 60 studies over 8 years, demonstrating safety, securing over 24 patents, and publishing a successful Phase II trial for chronic heart failure and peripheral vascular disease.[38]

Unfortunately, due to a poorly designed Phase III trial (which had benefits but failed to achieve statistical significance), Vasogen went bankrupt.[39] Few now know the company existed or that costly required Phase I and Phase II studies for UVBI have already been done.

Additionally, in 2015, AVIcure Bioscience published a Phase II safety study for UVBI,[40] and in 2019, it published a successful Phase III clinical trial.[41] Both trials showed safety for all patients and efficacy for the majority. Unfortunately, these studies on hepatitis C were conducted, and simultaneously, effective pharmaceutical treatments for hepatitis C hit the market, eliminating interest in alternative approaches.[42]

Remarkably, despite all this evidence and widespread usage for nearly a century, UVBI is still called "fringe" or "pseudoscientific" therapy with "no evidence," illustrating why those terms are meaningless.

Note: *The key requirement of the 2018 Right to Try Act is that Phase I safety studies have been completed.*[43]

Conclusion

The UVBI story represents a forgotten side of medicine — a safe, effective, affordable therapy that could have saved millions of lives was systematically buried to protect pharmaceutical profits. Despite overwhelming evidence from hundreds of studies and thousands of successfully treated patients over nearly a century, UVBI remains marginalized in American medicine.

The pattern — initial enthusiasm, remarkable results, systematic suppression through fraudulent studies, eventual marginalization — has been repeated with countless promising therapies. From hydroxychloroquine and ivermectin during COVID-19 to IV vitamin C for sepsis, the medical

establishment consistently employs the same playbook to eliminate competition to expensive pharmaceutical interventions.

Yet UVBI persists, quietly helping patients in integrative medicine practices across America and openly studied in countries like Russia and Germany. The therapy Dr. George Miley called “one of the greatest contributions to medicine ever made by a citizen of the United States” continues demonstrating remarkable potential for those fortunate enough to access it.

Understanding this history reveals fundamental corruption within our medical system — a system that prioritizes profits over patients and consistently suppresses safe, effective treatments that threaten pharmaceutical revenues. Only by recognizing these patterns can we begin to reclaim the remarkable healing potential that has been stolen from us.

[***Author’s Note:*** *This is an abridged version of a longer article about UVBI which goes into greater detail on the mechanisms behind UVBI, summarizes its vast body of published literature, and provides resources for those interested in accessing the most effective forms of this therapy (something many have now reported benefitting from). That article and its additional references can be read here.]*

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